

Part I

Executive Summary

BACKGROUND

The Department of Health (DOH) was mandated under Presidential Decree No. 996 dated September 16, 1976 to provide free basic immunization to eligible population. To operationalize this function, parents, guardians or persons having custody of the infant or child are duty-bound to present the child for basic immunization at the time and place specified by the DOH.

Recognizing the importance of immunization to address preventable diseases, the DOH, even before the passage of this decree, had launched the Expanded Programme on Immunization (EPI) on July 12, 1976. The program covers immunization for BCG (for extrapulmonary tuberculosis), DPT (Diphtheria, Pertussis and Tetanus), oral polio vaccine (OPV) (for poliomyelitis), Hepatitis B (for hepatitis infection), and measles (for measles infection). The DOH is assisted by the Local Government Units (LGUs) and government hospitals in the implementation and administration of this program.

The immunization program is intended to reduce the morbidity and mortality of children nationwide against the seven (7) vaccine-preventable diseases nationwide through the following strategies:

- Routine immunization services or in combination with supplementary immunization activities in all areas nationwide covering 95% of eligible population;
- Disease surveillance to the extent that the impact of immunization interventions can be evaluated, outbreaks rapidly identified, investigated and controlled, epidemics predicted and prevented, and importations rapidly identified and controlled;
- Special immunization on declared national immunization days (NIDs) covering the entire country or in cases of reported outbreak of disease covering selected areas where the polio virus outbreak was suspected; and
- Maintenance of high level preparedness to various derived polio virus or wild polio virus importation.

In view of these initiatives, in October 2000, the Philippines was certified by an international certifying body authorized by the World Health Organization (WHO) as a polio-free country.

For the continuous implementation of the program, a total of ₱683,511,000 was allotted from January 2001 to December 2002, of which ₱132,555,500 was allocated for the procurement of OPVs. From this allocation, 1,614,817 vials equivalent to 32,296,340 doses of vaccines were procured and received within the year for distribution to the different DOH Regional Offices/LGUs.

Another 229,400 vials equivalent to 4,588,000 doses of vaccines were received during the period out of previous years procurement. Of these vaccines, 999,543 vials equivalent to 19,990,860 doses were distributed during the period under audit leaving 844,674 vials in the custody of the DOH Central Office as of December 31, 2002. For the City of Kalookan, the DOH issued 10,310 vials equivalent to 234,460 doses in 2001 and 8,435 vials equivalent to 168,700 doses in 2002.

The quantity of vaccines to be procured is determined on the basis of the targeted eligible polio population which is equivalent to 3% of the total projected population of the National Statistics Office (NSO). For CYs 2001 and 2002, the DOH targeted 2,271,096 (excluding ARMM) and 2,398,914 eligible polio population and reported that 1,632,652 and 1,729,229 children, respectively, were immunized with three doses of OPV, both equivalent to 72%.

In the City of Kalookan, of the total eligible population of 36,732 and 37,690 for CYs 2001 and 2002, 86% and 81% were reported immunized with three doses of the same vaccine during the period, respectively. The City of Kalookan is composed of 36 Health Centers distributed throughout the City.

AUDIT OBJECTIVE

The audit was conducted to determine whether existing policies and procedures implementing the Polio Immunization Program were adequate and effective to sustain a polio-free status of the Philippines taking into consideration the following:

- Identification of eligible population ;
- Management of vaccines; and
- Monitoring and evaluation of the implementation of the program.

AUDIT SCOPE AND METHODOLOGY

The audit covered the implementation of the Polio Immunization Program of the government through routine immunization undertaken from January 2001 to December 2002. The implementing agencies included in the evaluation are the following:

- DOH Central Office
- National Capital Region (NCR)
- Selected Cities and Health Centers within Metro Manila
 - Manila
 - Quezon
 - Kalookan
 - Valenzuela
- Selected Hospitals within Metro Manila
 - Jose R. Reyes Memorial Medical Center
 - Quezon City General Hospital
 - Valenzuela General Hospital

The audit was confined to selected cities and hospitals within Metro Manila due to limited audit period.

The performance of the implementing agencies was assessed using the following criteria:

- Sound identification of eligible population
- Efficient management of vaccines
- Effective performance monitoring and evaluation system

During the audit, the team performed the following procedures, among others:

- Reviewed existing policies and procedures on the identification of eligible population, management of OPVs, and monitoring and evaluation of accomplishment / program;
- Interviewed personnel involved in the implementation of the program;
- Obtained and reviewed records, accomplishment reports, work plans and other relevant records and reports pertaining to the implementation of the program;
- Reviewed and evaluated the roles and responsibilities of agencies involved in the implementation of the program;

- Inspected selected health centers and district health centers within the jurisdiction of the LGUs covered in the audit; and
- Assessed the extent of the achievement of the program objectives.

For validation of program implementation, the team visited the Health Centers of Torres Bugallon, Grace Park Puericulture, Bagong Silang Phases 1 & 4 and Cielito & Parkland, all under the jurisdiction of the City of Kalookan.

The audit was conducted from November 18, 2002 to March 31, 2003 pursuant to COA Assignment Order No. 2002- 514 and 514A dated November 15, and 26, 2002, respectively, and Memorandum dated February 13, 2003. The results of the audit were discussed with the concerned officials and employees of Kalookan City and NCR on November 6, 2003.

AUDIT CONCLUSION

Generally, the existing policies and procedures for the implementation of the Polio Immunization Program can be considered adequate. However, these were not effectively implemented by the City Government of Kalookan resulting in overall accomplishments for CYs 2001 and 2002 of only 86% and 81%, respectively, out of the targeted 95% coverage. This condition would affect the government's objective of sustaining the polio-free status of the country.

The deficiencies in the implementation were manifested in the following cases:

- The target setting of eligible polio population was not revised to a more realistic projection as required under the EPI Manual. The DOH maintained the historical 3% projection at all levels. Based on this projection, however, the reported accomplishment per Health Center in Kalookan City ranged from as low as 22.84% to as high as 111.48%. Had projections been revised, the reported accomplishments could be properly assessed which would warrant the determination of whether or not the targeted coverage is achieved. The identification of eligible population is crucial not only in attaining the targeted coverage but also in determining the quantity of vaccines to be procured and distributed to Regional Offices and LGUs to effectively sustain the implementation of the program.
- The distribution of vaccines to the Health Centers of Kalookan City was not based on needs. Vaccine distribution to Health Centers which should be 167% of the basic requirements was equivalent to as low as 37% of the total vaccine requirements to as high as 221%. These vaccines were, however, not fully utilized by the end-users. There

were Health Centers with vaccine utilization of only 54% to 97% of the total vaccines received. This practice exposed the vaccines to outright expiration before the same were effectively utilized. As of December 2002, about 1,003 vials equivalent to 20,060 doses reportedly expired in the City of Kalookan.

- The performance of the participating agencies was not effectively monitored. It was noted that the required monitoring and evaluation process were not undertaken. The LGU then does not have an opportunity to assess the progress of the implementation of the program in the Health Centers and to address the risks associated in the implementation of the program.

The audit further disclosed that in CYs 2001, the overall EPI accomplishments of Kalookan City was not accurately reported. The number of fully immunized children in 7 Health Centers exceeded the highest accomplishment per antigen for the same period.

The inaccurate reporting affects the validity of the report and the results of the evaluation of the program implementation which is crucial in sustaining the country's status as a polio-free country.

As the Polio Immunization Program is a continuing activity of the Government and deficiency in program implementation would have a great impact on the health of the constituents, the team recommended measures to address these concerns for consideration by the City of Kalookan.

MANAGEMENT'S REACTION TO AUDIT OBSERVATIONS

The team forwarded the audit highlights to the City Mayor of Kalookan for comments on September 22, 2003. For clarification of certain issues, exit conference with the concerned officials and staff of the City and NCR was conducted on November 6, 2003.

Generally, the City recognized the existence of the problems raised in the report and resolved to initiate appropriate steps to improve its performance. The concerned City officials submitted explanations and constraints surrounding the implementation of the program which were incorporated in the report, together with the team's rejoinder.